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APPLICANTS

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** CONTINUING DATA ***** N/A *[Signature]*

** FOREIGN APPLICATIONS ***** N/A *[Signature]*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED
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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <i>[Signature]</i> Initials <i>[Signature]</i>	STATE OR COUNTRY IL	SHEETS DRAWING 18	TOTAL CLAIMS 25	INDEPENDENT CLAIMS 2
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ADDRESS
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 CHICAGO , IL
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TITLE
 Tool-less blade clamping apparatus for a reciprocating tool

FILING FEE	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time)
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